


PTO/SB/31 (08-04)
Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 8737-000010
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at fax no. 571-273-8300 on <u>May 22, 2006</u> .	In re Application of Hon Mun Ng	
	Application Number 10/089,292	Filed August 28, 2002
	For Novel HEV Antigenic Peptide and Methods	
Signature _____	Art Unit 1648	Examiner Bao Qun Li
Typed or printed name <u>Linda M. Deschere</u>		
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 500.00.		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 600.00.		
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<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>08-0750</u> . I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.138(a) (PTO/SB/22) is enclosed.		
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I am the		
<input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>34,811</u>		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
		 _____ Signature Linda M. Deschere _____ Typed or printed name 248-641-1600 _____ Telephone number <u>22 MAY 06</u> _____ Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		

☒ *Total of two forms are submitted.

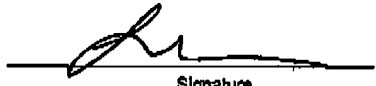
This collection of information is required by 37 CFR 1.101. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 8797-000010
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	Application Number 10/089,292	Filed August 28, 2002
	For Novel HEV Antigenic Peptide and Methods	
Signature _____	Art Unit 1648	Examiner Bao Qun Li
Typed or printed name <u>Linda M. Deschere</u>		
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u>.		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>500.00</u>.		
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I am the		
<input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/66)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>34,811</u>		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
		 Signature <u>Linda M. Deschere</u> Typed or printed name <u>248-641-1600</u> Telephone number <u>22 MAY 06</u> Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		

☒ *Total of two forms are submitted.

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